

# PRINTER RUSH

(PTO ASSISTANCE)

Application : 10/537765

Examiner : Robinson

GAU : 1794

From: PAP

Location: IDC FMF FDC

Date: 6/18/08

Tracking #: EPM 10/537765  
6/13/08

Week 6/12/08  
Date:

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW/FWCLM	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please provide a complete index of claims  
for this file.

Thank you

[XRUSH] RESPONSE: Index of claims provided.

INITIALS: /L.R./

EXAMINER: PUBS contacts -- for DESIGNS: Don Fairchild, 703-308-9250 x126; for ALL OTHER FILES:  
Bernadette Queen, 703-308-9250 x121

NOTE: This form will be included as part of the official USPTO record, with the Response document  
coded as XRUSH.